Fill in this info	rmation to identify your	case:			
Debtor 1	Antoine D Howell				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States E	Bankruptcy Court for the:	EASTERN DISTRICT C	DF MICHIGAN		
Case number	19-46430				
(if known)	13 40400				Check if this is an amended filing
,					_

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

Pai	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,787.10
	1c. Copy line 63, Total of all property on Schedule A/B	\$	4,787.10
Pai	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	14,030.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	17,476.00
	Your total liabilities	\$	31,506.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,421.04
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,420.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	, family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information page 1 of 2

Best Case Bankruptcy

the court with your other schedules.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,628.33 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	14,030.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	14,030.00

riii in this inform	nation to identify your			
Debtor 1	Antoine D Howel			
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN	
Case number _1	19-46430			☐ Check if this is ar amended filing
				amended ming
Official Fo	rm 106A/B			
	e A/B: Prop	ertv		12/15
			nce. If an asset fits in more than one category, list the	
	e space is needed, attach		d people are filing together, both are equally responsib n. On the top of any additional pages, write your name	
Part 1: Describe	Each Residence, Building	g, Land, or Other Real Estate	You Own or Have an Interest In	
Do you own or h	nave any legal or equitabl	le interest in any residence, b	ouilding, land, or similar property?	
■ No. Go to Part	t 2.			
☐ Yes. Where is	s the property?			
o you own, leas omeone else driv	es. If you lease a vehic		nicles, whether they are registered or not? Include the G: Executory Contracts and Unexpired Leases.	e any vehicles you own that
o you own, leas omeone else driv	se, or have legal or eq	ele, also report it on <i>Schedu</i>	lle G: Executory Contracts and Unexpired Leases.	e any vehicles you own that
o you own, leasomeone else driv Cars, vans, tru No Yes Watercraft, air	se, or have legal or eq ves. If you lease a vehic ucks, tractors, sport u	tility vehicles, motorcycle ATVs and other recreation	lle G: Executory Contracts and Unexpired Leases.	e any vehicles you own that
Oo you own, leasomeone else driv Cars, vans, tru No Yes Watercraft, air	se, or have legal or eq ves. If you lease a vehic ucks, tractors, sport u	tility vehicles, motorcycle ATVs and other recreation	es es all vehicles, other vehicles, and accessories	e any vehicles you own that
Oo you own, leasomeone else driv Cars, vans, tru No Yes Watercraft, air Examples: Boat	se, or have legal or eq ves. If you lease a vehic ucks, tractors, sport u	tility vehicles, motorcycle ATVs and other recreation	es es all vehicles, other vehicles, and accessories	e any vehicles you own that
Oo you own, leas omeone else driv Cars, vans, tru No Yes Watercraft, air Examples: Boat	se, or have legal or eq ves. If you lease a vehic ucks, tractors, sport u	tility vehicles, motorcycle ATVs and other recreation	es es all vehicles, other vehicles, and accessories	e any vehicles you own that
o you own, lease ormeone else drive. Cars, vans, true. No Yes Watercraft, air Examples: Boat No Yes Add the dolla	se, or have legal or eques. If you lease a vehicus, tractors, sport uncks, tractors, sport uncks, tractors, motor homes, Astalers, motors, persurvalue of the portion	tility vehicles, motorcycle ATVs and other recreation conal watercraft, fishing vest	es es all vehicles, other vehicles, and accessories	e any vehicles you own that
No Watercraft, air Examples: Boat No Yes Add the dolla	se, or have legal or eques. If you lease a vehicus, tractors, sport uncks, tractors, sport uncks, tractors, motor homes, Astalers, motors, persurvalue of the portion	tility vehicles, motorcycle ATVs and other recreation conal watercraft, fishing vest	es al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories other tries from Part 2, including any entries for	
No Watercraft, air Examples: Boat No Yes Add the dolla pages you ha	se, or have legal or eques. If you lease a vehicle ucks, tractors, sport understanding the content of the portion are attached for Part 2	tility vehicles, motorcycle ATVs and other recreation conal watercraft, fishing vest	al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories atries from Part 2, including any entries for	\$0.00 Current value of the portion you own? Do not deduct secured
No Yes Watercraft, air Examples: Boat No Yes Add the dolla pages you ha Part 3: Describe Do you own or h	se, or have legal or equives. If you lease a vehicle ves. If you have a very legal or equition to the portion and the vestigation and furnishings and suppliances, furniture vestigation appliances, furniture vestigation appliances, furniture vestigation and vestiga	cle, also report it on Schedu stility vehicles, motorcycle at the second street and other recreation sonal watercraft, fishing vest you own for all of your end. Write that number here	al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories atries from Part 2, including any entries for	\$0.00 Current value of the portion you own?
No Yes Watercraft, air Examples: Boat No Yes Add the dolla pages you ha Part 3: Describe To you own or h	se, or have legal or equives. If you lease a vehicle ves. If you have a very legal or equition to the portion and the vestigation and furnishings and suppliances, furniture vestigation appliances, furniture vestigation appliances, furniture vestigation and vestiga	tility vehicles, motorcycle ATVs and other recreation conal watercraft, fishing vest Write that number here sehold Items table interest in any of the	al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories atries from Part 2, including any entries for	\$0.00 Current value of the portion you own? Do not deduct secured

including cell phones, cameras, media players, games

☐ No

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Antoine D H	lowell	Case number (if known)	19-46430
■ Yes.	Describe			
		Cell Phone, Playstation Games Location: 14413 Grandmont, Detroit MI 48227		\$300.00
		d figurines; paintings, prints, or other artwork; books, pictures, or other ions, memorabilia, collectibles	art objects; stamp, coin,	or baseball card collections;
☐ Yes.	Describe			
	lent for sports a les: Sports, phot musical inst	ographic, exercise, and other hobby equipment; bicycles, pool tables, q	golf clubs, skis; canoes a	and kayaks; carpentry tools;
_	Describe			
□ No		s, shotguns, ammunition, and related equipment		
		40 Cal XD Location: 14413 Grandmont, Detroit MI 48227		\$400.00
□ No	pies: Everyday c	Assorted Clothing & Personal Effects Location: 14413 Grandmont, Detroit MI 48227		\$800.00
□ No		ewelry, costume jewelry, engagement rings, wedding rings, heirloom je	welry, watches, gems, g	old, silver
		Watch Location: 14413 Grandmont, Detroit MI 48227		\$10.00
Exam _l ■ No	arm animals ples: Dogs, cats, Describe	birds, horses		
■ No	-	nd household items you did not already list, including any health a	aids you did not list	
⊔ Yes.	Give specific in	rormation	ı	
		of all of your entries from Part 3, including any entries for pages number here	you have attached	\$2,510.00
	escribe Your Fina			
Do you ov	wn or have any	legal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

De	ebtor 1 Antoine I	D Howell			Case number (if known)	19-46430		
16.	. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No							
	_							
					Cash on Hand Location: 14413 Grandmont, Detroit MI 48227	\$10.00		
17.		g, savings, or other fina		certificates of deposit; shares in of the same institution, list each.	credit unions, brokerage h	nouses, and other similar		
	□ No ■ Yes			Institution name:				
		17.1. Prepai d	Debit Card	Elite Paycheck Debit Visa		\$200.00		
		17.2. Prepai d	l Debit Card	Debit Cash App Card		\$100.00		
18.	Examples: Bond fur	ds, or publicly traded ands, investment account		ge firms, money market accounts				
	■ No □ Yes	Institution	or issuer name	:				
19.	Non-publicly trade joint venture ■ No	d stock and interests i	n incorporated	d and unincorporated business	es, including an interes	t in an LLC, partnership, and		
		c information about then Name of entity			% of ownership:			
20.	Negotiable instrume Non-negotiable inst	ents include personal ch	ecks, cashiers' cannot transfer	e and non-negotiable instrumen checks, promissory notes, and m to someone by signing or deliveri	noney orders.			
21.	:		401(k), 403(b)	, thrift savings accounts, or other	pension or profit-sharing	plans		
	■ No □ Yes. List each acc	count separately. Type of account:		Institution name:				
22.		used deposits you have		you may continue service or use for utilities (electric, gas, water), tele		nies, or others		
	☐ Yes			Institution name or individual:				
23.	Annuities (A contra	ct for a periodic paymer	nt of money to y	ou, either for life or for a number	of years)			
	☐ Yes	Issuer name and desc	cription.					
24.		cation IRA, in an accou (1), 529A(b), and 529(b)		ed ABLE program, or under a qu	ualified state tuition pro	gram.		
	Yes	Institution name and o	description. Sep	parately file the records of any inte	erests.11 U.S.C. § 521(c):			

Official Form 106A/B Schedule A/B: Property page 3

Deb	tor 1	Antoine D Howell		Case number (if known)	19-46430
_	Trusts ■ No	, equitable or future interests in	property (other than anything listed in I	ine 1), and rights or powers exe	rcisable for your benefit
		Give specific information about the	nem		
	Exam		e secrets, and other intellectual property sites, proceeds from royalties and licensing		
	■ No □ Yes.	Give specific information about the	nem		
_		es, franchises, and other gener oles: Building permits, exclusive lie	al intangibles censes, cooperative association holdings, l	iquor licenses, professional licens	es
		Give specific information about the	nem		
Mor	ney or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
_	Tax ref	funds owed to you			
_	_	Give specific information about th	em, including whether you already filed the	e returns and the tax years	
			Potential 2018 Income Tax Refund Federal, State, and Local		\$950.00
			Estimated Prorated 2018 Income 1	Гах	\$300.00
			Federal, State, and Local		
	<i>Exam</i> INo	support oles: Past due or lump sum alimor Give specific information	ny, spousal support, child support, maintena	ance, divorce settlement, property	settlement
		amounts someone owes you oles: Unpaid wages, disability insu benefits; unpaid loans you m	rance payments, disability benefits, sick pa lade to someone else	ay, vacation pay, workers' comper	nsation, Social Security
		Give specific information			
		F	Funds Garnished From Debtor w/in	90 Days Prior to Filing	\$717.10
	<i>Exam</i> INo	sts in insurance policies oles: Health, disability, or life insur Name the insurance company of Company r		i, homeowner's, or renter's insurar Beneficiary:	nce Surrender or refund value:
•	If you somed	terest in property that is due yo are the beneficiary of a living trust one has died. Give specific information	u from someone who has died , expect proceeds from a life insurance pol	icy, or are currently entitled to rece	
_			or not you have filed a lawsuit or made a utes, insurance claims, or rights to sue	a demand for payment	

Official Form 106A/B Schedule A/B: Property page 4 Doc 13 Filed 05/13/19 Entered 05/13/19 16:31:05 Page 6 of 40

Debt	or 1	Antoine D Howell		Case number (if known)	19-46430
	l Yes.	Describe each claim			
=	No	contingent and unliquidated claims of every nature, inclu	ding counterclaims	of the debtor and rights to	set off claims
-	No	Give specific information			
		the dollar value of all of your entries from Part 4, includinart 4. Write that number here			\$2,277.10
Part !	5: De	scribe Any Business-Related Property You Own or Have an Intel	est In. List any real est	ate in Part 1.	
=	No. G	own or have any legal or equitable interest in any business-related to Part 6. So to line 38.	ed property?		
Part (scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Intere	st In.	
_		own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	_	Go to Part 7. Go to line 47.			
•	□ 163	. Go to line 47.			
Part 7	7:	Describe All Property You Own or Have an Interest in That You	ı Did Not List Above		
	Exam	have other property of any kind you did not already list bles: Season tickets, country club membership	?		
	l No l Yes.	Give specific information			
54.	Add	the dollar value of all of your entries from Part 7. Write th	at number here	[\$0.00
Part 8	8:	List the Totals of Each Part of this Form			
55.	Part	1: Total real estate, line 2			\$0.00
56.	Part :	2: Total vehicles, line 5	\$0.00		
		3: Total personal and household items, line 15	\$2,510.00		
		4: Total financial assets, line 36	\$2,277.10		
		5: Total business-related property, line 45 6: Total farm- and fishing-related property, line 52	\$0.00		
		7: Total other property not listed, line 54 +	\$0.00 \$0.00		
		personal property. Add lines 56 through 61	\$4,787.10	Copy personal property to	otal \$4,787.10
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$4,787.10

Official Form 106A/B Schedule A/B: Property page 5

Fill in this info					
Debtor 1	Antoine D Howell				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT O	PF MICHIGAN		
Case number	19-46430				
(if known)	10 10100				☐ Check if this is a amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim	as Exempt
-----------------------------------------	-----------

	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)				
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	Ordinary Household Goods & Furnishings	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)			
	Location: 14413 Grandmont, Detroit MI 48227 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit				
	Cell Phone, Playstation Games Location: 14413 Grandmont, Detroit	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)			
	MI 48227 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit				
	40 Cal XD Location: 14413 Grandmont, Detroit	\$400.00		\$400.00	11 U.S.C. § 522(d)(5)			
	MI 48227 Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit				
	Assorted Clothing & Personal Effects Location: 14413 Grandmont, Detroit	\$800.00		\$800.00	11 U.S.C. § 522(d)(3)			
	MI 48227 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit				
	Watch Location: 14413 Grandmont, Detroit	\$10.00		\$10.00	11 U.S.C. § 522(d)(4)			
	MI 48227 Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Cash on Hand Location: 14413 Grandmont, Detroit	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
	MI 48227 Line from <i>Schedule A/B</i> : 16.1			100% of fair market value, up to any applicable statutory limit	
	Prepaid Debit Card: Elite Paycheck Debit Visa	\$200.00		\$200.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Prepaid Debit Card: Debit Cash App Card	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Potential 2018 Income Tax Refund Federal, State, and Local	\$950.00		\$950.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	Estimated Prorated 2018 Income Tax Refund	\$300.00		\$300.00	11 U.S.C. § 522(d)(5)
	Federal, State, and Local Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit	
	Funds Garnished From Debtor w/in 90 Days Prior to Filing	\$717.10		\$717.10	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 30.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3			led on or after the date of adjustme	nt.)
	Yes. Did you acquire the property covere	ed by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

Fill in this infor				
Debtor 1	Antoine D Howel	l		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
Case number	19-46430			
(if known)				☐ Check if this is an
				amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Fill in this information to identify your case:					
Debtor 1 Antoine D Howell					
First Name	Middle Name Last Nam	е			
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Nam	е			
United States Bankruptcy Court for the: EAS	TERN DISTRICT OF MICHIGAN				
Case number 19-46430					
(if known)				_	if this is an
				amend	ed filing
Schedule E/F: Creditors Who I Be as complete and accurate as possible. Use Part any executory contracts or unexpired leases that co Schedule G: Executory Contracts and Unexpired Le Schedule D: Creditors Who Have Claims Secured by	1 for creditors with PRIORITY claims a ould result in a claim. Also list execute ases (Official Form 106G). Do not incl property. If more space is needed, co	nd Part 2 fory contracude any cre	ts on Schedule A/B: P editors with partially s t you need, fill it out, r	roperty (Official For ecured claims that a number the entries ir	n 106A/B) and on re listed in the boxes on the
eft. Attach the Continuation Page to this page. If yoname and case number (if known). ————	u nave no information to report in a Pa	art, do not i	ille that Part. On the to	op of any additional	pages, write your
Part 1: List All of Your PRIORITY Unsecur	ed Claims				
1. Do any creditors have priority unsecured claim	s against you?				
	.o ugumot you .				
☐ No. Go to Part 2.	o agamer you				
☐ No. Go to Part 2. ■ Yes.					
■ Yes.	reditor has more than one priority unsecu priority and nonpriority amounts, list that ding to the creditor's name. If you have n	claim here a	and show both priority a	nd nonpriority amount	s. As much as
 Yes. List all of your priority unsecured claims. If a cidentify what type of claim it is. If a claim has both possible, list the claims in alphabetical order according to the claims of the claims in alphabetical order according to the claims of the claims in alphabetical order according to the claims of the claims. 	reditor has more than one priority unsecu priority and nonpriority amounts, list that ding to the creditor's name. If you have n claim, list the other creditors in Part 3.	claim here a nore than tw	and show both priority a	nd nonpriority amount nims, fill out the Contir	s. As much as nuation Page of Nonpriority
 Yes. List all of your priority unsecured claims. If a clidentify what type of claim it is. If a claim has both possible, list the claims in alphabetical order accor Part 1. If more than one creditor holds a particular 	reditor has more than one priority unsecu priority and nonpriority amounts, list that ding to the creditor's name. If you have n claim, list the other creditors in Part 3.	claim here a nore than tw booklet.)	and show both priority a o priority unsecured cla	nd nonpriority amount nims, fill out the Contir	s. As much as nuation Page of
Yes. 2. List all of your priority unsecured claims. If a clidentify what type of claim it is. If a claim has both possible, list the claims in alphabetical order accor Part 1. If more than one creditor holds a particular (For an explanation of each type of claim, see the	reditor has more than one priority unsecu priority and nonpriority amounts, list that ding to the creditor's name. If you have n claim, list the other creditors in Part 3. instructions for this form in the instruction	claim here a nore than two booklet.)	and show both priority and show both priority unsecured class Total claim \$4,825.00	nd nonpriority amount ims, fill out the Contir Priority amount	s. As much as nuation Page of Nonpriority amount
Yes. 2. List all of your priority unsecured claims. If a clidentify what type of claim it is. If a claim has both possible, list the claims in alphabetical order accor Part 1. If more than one creditor holds a particular (For an explanation of each type of claim, see the State Of Mi Office Chi	reditor has more than one priority unsecu priority and nonpriority amounts, list that ding to the creditor's name. If you have n claim, list the other creditors in Part 3. instructions for this form in the instruction	claim here a nore than two booklet.) 3028 Opened	and show both priority and show both priority unsecured cla	nd nonpriority amount ims, fill out the Contir Priority amount	s. As much as nuation Page of Nonpriority amount
Yes. 2. List all of your priority unsecured claims. If a cidentify what type of claim it is. If a claim has both possible, list the claims in alphabetical order accorpart 1. If more than one creditor holds a particular (For an explanation of each type of claim, see the 2.1 State Of Mi Office Chi Priority Creditor's Name Po Box 30478	reditor has more than one priority unsecu priority and nonpriority amounts, list that ding to the creditor's name. If you have n claim, list the other creditors in Part 3. instructions for this form in the instruction Last 4 digits of account number	claim here a nore than two booklet.) 3028 Opened Active	Total claim \$4,825.00 d 09/07 Last 3/27/19	nd nonpriority amount ims, fill out the Contir Priority amount	s. As much as nuation Page of Nonpriority amount
Yes. 2. List all of your priority unsecured claims. If a clidentify what type of claim it is. If a claim has both possible, list the claims in alphabetical order accorder 1. If more than one creditor holds a particular (For an explanation of each type of claim, see the 2.1 State Of Mi Office Chi Priority Creditor's Name Po Box 30478 Lansing, MI 48909	reditor has more than one priority unsecupriority and nonpriority amounts, list that ding to the creditor's name. If you have n claim, list the other creditors in Part 3. instructions for this form in the instruction Last 4 digits of account number When was the debt incurred?	claim here a nore than two booklet.) 3028 Opened Active	Total claim \$4,825.00 d 09/07 Last 3/27/19	nd nonpriority amount ims, fill out the Contir Priority amount	s. As much as nuation Page of Nonpriority amount
Yes. 2. List all of your priority unsecured claims. If a cidentify what type of claim it is. If a claim has both possible, list the claims in alphabetical order according to the part 1. If more than one creditor holds a particular (For an explanation of each type of claim, see the 2.1 State Of Mi Office Chi Priority Creditor's Name Po Box 30478 Lansing, MI 48909 Number Street City State Zip Code	reditor has more than one priority unsecupriority and nonpriority amounts, list that ding to the creditor's name. If you have n claim, list the other creditors in Part 3. instructions for this form in the instruction Last 4 digits of account number When was the debt incurred? As of the date you file, the claim	claim here a nore than two booklet.) 3028 Opened Active	Total claim \$4,825.00 d 09/07 Last 3/27/19	nd nonpriority amount ims, fill out the Contir Priority amount	s. As much as nuation Page of Nonpriority amount
Yes. 2. List all of your priority unsecured claims. If a clidentify what type of claim it is. If a claim has both possible, list the claims in alphabetical order according a part 1. If more than one creditor holds a particular (For an explanation of each type of claim, see the 2.1 State Of Mi Office Chi Priority Creditor's Name Po Box 30478 Lansing, MI 48909 Number Street City State Zip Code Who incurred the debt? Check one.	reditor has more than one priority unsecupriority and nonpriority amounts, list that ding to the creditor's name. If you have n claim, list the other creditors in Part 3. instructions for this form in the instruction Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent	claim here a nore than two booklet.) 3028 Opened Active	Total claim \$4,825.00 d 09/07 Last 3/27/19	nd nonpriority amount ims, fill out the Contir Priority amount	s. As much as nuation Page of Nonpriority amount
Yes. 2. List all of your priority unsecured claims. If a cidentify what type of claim it is. If a claim has both possible, list the claims in alphabetical order accorpart 1. If more than one creditor holds a particular (For an explanation of each type of claim, see the 2.1 State Of Mi Office Chi Priority Creditor's Name Po Box 30478 Lansing, MI 48909 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only	reditor has more than one priority unsecupriority and nonpriority amounts, list that diding to the creditor's name. If you have n claim, list the other creditors in Part 3. instructions for this form in the instruction Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated	claim here a nore than two booklet.) 3028 Opened Active is: Check a	Total claim \$4,825.00 d 09/07 Last 3/27/19	nd nonpriority amount ims, fill out the Contir Priority amount	s. As much as nuation Page of Nonpriority amount
Yes. 2. List all of your priority unsecured claims. If a clidentify what type of claim it is. If a claim has both possible, list the claims in alphabetical order according a particular (For an explanation of each type of claim, see the 2.1 State Of Mi Office Chi Priority Creditor's Name Po Box 30478 Lansing, MI 48909 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	reditor has more than one priority unsecupriority and nonpriority amounts, list that ding to the creditor's name. If you have n claim, list the other creditors in Part 3. instructions for this form in the instruction Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed	claim here a nore than two booklet.) 3028 Opened Active is: Check a	Total claim \$4,825.00 d 09/07 Last 3/27/19	nd nonpriority amount ims, fill out the Contir Priority amount	s. As much as nuation Page of Nonpriority amount
Yes. 2. List all of your priority unsecured claims. If a clidentify what type of claim it is. If a claim has both possible, list the claims in alphabetical order accorpant 1. If more than one creditor holds a particular (For an explanation of each type of claim, see the 2.1 State Of Mi Office Chi Priority Creditor's Name Po Box 30478 Lansing, MI 48909 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	reditor has more than one priority unsecupriority and nonpriority amounts, list that diding to the creditor's name. If you have n claim, list the other creditors in Part 3. instructions for this form in the instruction Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of PRIORITY unsecured claim Domestic support obligations	claim here a nore than two booklet.) 3028 Opened Active is: Check a saim:	Total claim \$4,825.00 d 09/07 Last 3/27/19 all that apply	nd nonpriority amount ims, fill out the Contir Priority amount	s. As much as nuation Page of Nonpriority amount
Yes. 2. List all of your priority unsecured claims. If a clidentify what type of claim it is. If a claim has both possible, list the claims in alphabetical order accorder a croper and the claim of each type of claim, see the (For an explanation of each type of claim, see the Priority Creditor's Name Po Box 30478 Lansing, MI 48909 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another	reditor has more than one priority unsecupriority and nonpriority amounts, list that diding to the creditor's name. If you have n claim, list the other creditors in Part 3. instructions for this form in the instruction Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of PRIORITY unsecured claim Domestic support obligations	claim here a nore than two booklet.) 3028 Opened Active is: Check a saim:	Total claim \$4,825.00 d 09/07 Last 3/27/19 all that apply	nd nonpriority amount ims, fill out the Contir Priority amount	s. As much as nuation Page of Nonpriority amount

Family Support

☐ Yes

ebtor 1 Antoine D Howell		Case nur	mber (if known)	19-46430	
State Of Mi Office Chi	Last 4 digits of account number	3028	\$4,804.00	\$0.00	\$4,804.00
Priority Creditor's Name Po Box 30478 Lansing, MI 48909	When was the debt incurred?	Opened (Active 3/	07/13 Last /27/19	_	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all t	that apply		
Who incurred the debt? Check one.	☐ Contingent				
Debtor 1 only	☐ Unliquidated				
☐ Debtor 2 only	☐ Disputed				
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
☐ At least one of the debtors and another	■ Domestic support obligations				
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Taxes and certain other debts y☐ Claims for death or personal inj	ū			
■ No	Other. Specify				
Yes	Family Sup	port			
State Of Mi Office Chi Priority Creditor's Name	Last 4 digits of account number	3028	\$4,401.00	\$0.00	\$4,401.00
Po Box 30478 Lansing, MI 48909	When was the debt incurred?	Opened 0 Active 3/	04/11 Last /27/19	_	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all t	that apply		
Who incurred the debt? Check one.	☐ Contingent				
Debtor 1 only	☐ Unliquidated				
☐ Debtor 2 only	☐ Disputed				
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
\square At least one of the debtors and another	Domestic support obligations				
☐ Check if this claim is for a community debt	☐ Taxes and certain other debts y	ou owe the go	overnment		
Is the claim subject to offset?	Claims for death or personal inj	ury while you	were intoxicated		
■ No	Other. Specify				
☐ Yes	Family Sup	port			
rt 2: List All of Your NONPRIORITY Unsecu	ured Claims				
Do any creditors have nonpriority unsecured claim	ns against you?				
☐ No. You have nothing to report in this part. Submit	this form to the court with your other s	schedules.			
Yes.					
List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2.	laim. For each claim listed, identify wh	nat type of clai	im it is. Do not list cl	aims already included in F	art 1. If more
				Total c	aim

Antoine D Howell		Case number (if known) 19-46430				
Ale Solution	Last 4 digits of account number	R880	\$797.00			
Nonpriority Creditor's Name 1 West Illinois Street	When was the debt incurred?	Opened 3/12/13 Last Active 3/31/14				
Saint Charles, IL 60174 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
■ Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	□ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
Yes	Other. Specify Unsecured					
Allstate Credit Bureau	Last 4 digits of account number	82X1	\$60.00			
Nonpriority Creditor's Name 22000 Springbrook Ave Ste. 201 Farmington, MI 48336	When was the debt incurred?	Opened 01/15				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
■ No	Debts to pension or profit-sharing					
Yes	Other. Specify Collection Of The Sh					
AT&T	Last 4 digits of account number		\$200.00			
Nonpriority Creditor's Name PO Box 5014 East Lansing, MI 48823	When was the debt incurred?	Prior to 2019				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
☐ Yes	Other. Specify Utility Bill					

	Case number (if known) 19-46430	btor 1 Antoine D Howell	Debto		
\$0.00	Last 4 digits of account number	Capital One	4.4		
	When was the debt incurred?	Nonpriority Creditor's Name PO Box 60000 Seattle, WA 98190	_		
	As of the date you file, the claim is: Check all that apply	Number Street City State Zip Code			
		Who incurred the debt? Check one.			
	☐ Contingent	Debtor 1 only			
	☐ Unliquidated	Debtor 2 only			
	☐ Disputed	☐ Debtor 1 and Debtor 2 only			
	Type of NONPRIORITY unsecured claim:	☐ At least one of the debtors and another			
	☐ Check if this claim is for a community ☐ Student loans				
	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	debt Is the claim subject to offset?			
	\square Debts to pension or profit-sharing plans, and other similar debts	■ No			
	Other. Specify	Yes			
\$200.00	Last 4 digits of account number		4.5		
	When was the debt incurred? Prior to 2019	Nonpriority Creditor's Name 3907 Woodward Ave., Suite A Detroit, MI 48201			
	As of the date you file, the claim is: Check all that apply	Number Street City State Zip Code Who incurred the debt? Check one.			
	☐ Contingent	Debtor 1 only			
	☐ Unliquidated	Debtor 2 only			
	□ Disputed	Debtor 1 and Debtor 2 only			
	Type of NONPRIORITY unsecured claim:	☐ At least one of the debtors and another			
	☐ Student loans	☐ Check if this claim is for a community			
	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	debt Is the claim subject to offset?			
	\square Debts to pension or profit-sharing plans, and other similar debts	■ No			
	Other. Specify Utility Bill	Yes			
\$200.00	Last 4 digits of account number		4.6		
	When was the debt incurred? Prior to 2019	Nonpriority Creditor's Name PO Box 740309 Cincinnati, OH 45274-0309			
	As of the date you file, the claim is: Check all that apply	Number Street City State Zip Code Who incurred the debt? Check one.			
	☐ Contingent	Debtor 1 only			
	☐ Unliquidated	Debtor 2 only			
	☐ Disputed	Debtor 1 and Debtor 2 only			
	Type of NONPRIORITY unsecured claim:	☐ At least one of the debtors and another			
	☐ Student loans	☐ Check if this claim is for a community			
	\square Obligations arising out of a separation agreement or divorce that you did not	debt			
	report as priority claims	Is the claim subject to offset?			
	\square Debts to pension or profit-sharing plans, and other similar debts	■ No			
	■ Other. Specify Utility Bill	☐ Yes			

Debtor 1	Antoine D Howell		Case number (if known) 19-46430	
	Convergent Outsourcing Nonpriority Creditor's Name	Last 4 digits of account number	9756	\$435.00
	800 Sw 39th St Renton, WA 98057	When was the debt incurred?	Opened 12/16	
_	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	•	report as priority claims Debts to pension or profit-sharir	a plane, and other similar debte	
	■ No	·		
	Yes	Other. Specify Collection	Attorney Sprint	
	Credit Acceptance Corp	Last 4 digits of account number	0624	\$11,890.00
	Nonpriority Creditor's Name		Opened 09/16 Last Active	
	Po Box 5070 Southfield, MI 48086	When was the debt incurred?	Opened 08/16 Last Active 4/08/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	Other Specify Automobile	<u> </u>	
4.9	Credit Management Lp	Last 4 digits of account number	6029	\$222.00
	Nonpriority Creditor's Name	- Last 4 digits of decount number		ΨΖΖΖ.00
	6080 Tennyson Parkway Plano, TX 75024	When was the debt incurred?	Opened 10/12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	■ Other. Specify And Phone	Attorney Wow Internet Cable	

Antoine D Howell		Case number (if known) 19-46430			
DTE Energy	Last 4 digits of account number		\$200.00		
Nonpriority Creditor's Name PO Box 740786	When was the debt incurred?	Prior to 2019	·		
Cincinnati, OH 45274 Number Street City State Zip Code	As of the date you file, the claim				
Who incurred the debt? Check one.	_				
Debtor 1 only	Contingent				
Debtor 2 only	Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharing	ng plans, and other similar debts			
Yes	■ Other Specify Utility Bill				
Franklin Collection Sv	Last 4 digits of account number	9472	\$834.0		
Nonpriority Creditor's Name 2978 W Jackson St Tupelo, MS 38803	When was the debt incurred?	Opened 02/19			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a sepreport as priority claims				
■ No	Debts to pension or profit-sharing				
Yes	■ Other. Specify Collection				
Guaranty Bank	Last 4 digits of account number	0001	Unknow		
Nonpriority Creditor's Name					
4000 W. Brown Deer Rd Brown Deer, WI 53209	When was the debt incurred?	Opened 04/15 Last Active 7/13/15			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sep.				
Is the claim subject to offset?	report as priority claims	-			
No	Debts to pension or profit-shari	- ·			
	■ Other. Specify Credit card purchases				

1 Antoine D Howell					
Henry Ford Health System	Last 4 digits of account number		\$300		
Nonpriority Creditor's Name PO Box 339 Troy, MI 48099	When was the debt incurred?	Prior to 2019			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	paration agreement or divorce that you did not			
■ No	Debts to pension or profit-shari	ing plans, and other similar debts			
Yes	Other. Specify Medical Bi	ill			
Lvnv Funding Llc	Last 4 digits of account number	0025	\$838		
Nonpriority Creditor's Name C/o Resurgent Capital Services Greenville, SC 29602	When was the debt incurred?	Opened 12/17			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	paration agreement or divorce that you did not			
■ No	Debts to pension or profit-shari	ing plans, and other similar debts			
☐ Yes	■ Other Specify Factoring Company	Company Account Dte Energy			
Sinai Grace Hospital	Last 4 digits of account number		\$300		
Nonpriority Creditor's Name	_				
6071 W. Outer Dr	When was the debt incurred?	Prior to 2019			
Detroit, MI 48235 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a sep	paration agreement or divorce that you did not			
	<u></u>	ing plans, and other similar debts			

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Other. Specify Medical Bill

Sprint	Last 4 digits of account number	\$200
Nonpriority Creditor's Name		————
PO Box 4191	When was the debt incurred? Prior to 2019	
Carol Stream, IL 60197 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, and the same year me, and ordinate or consort an intercepting	
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Balance owed	
St. John Providence	Last 4 digits of account number	\$300
Nonpriority Creditor's Name		+00.
PO Box 42008	When was the debt incurred? Prior to 2019	
Phoenix, AZ 85080-2008 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
□ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Medical Bill	
TCF National Bank	Last 4 digits of account number	\$200
Nonpriority Creditor's Name		
PO Box 537980 Livonia, MI 48153	When was the debt incurred? Prior to 2019	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset? ■	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Balance owed	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total Claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 9 of 10

Debtor 1 A	ntoine [) Howell	Case number (if known) 19-46430				
Total	6a.	Domestic support obligations	6a.	\$	14,030.00		
claims							
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00		
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00		
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00		
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	14,030.00		
	6f.	Student loans	6f.	Tota	I Claim 0.00		
Total claims				·	<u> </u>		
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00		
	6h.		6h.	\$	0.00		
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	17,476.00		
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	17,476.00		

Fill in this inform	mation to identify your	case:			
Debtor 1	Antoine D Howell				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
_	19-46430				
(if known)				☐ Check if t	
				amended	l filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4			<u> </u>	2 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5	,		3.0.0	3000	
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>

Fill in this	information to identify your	case:			
Debtor 1	Antoine D Howel				
D 1 / 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT (OF MICHIGAN		
Case num (if known)	ber 19-46430				☐ Check if this is an amended filing
Sched	l Form 106H Iule H: Your Cod				12/15
people are fill it out, a	e filing together, both are equ	ally responsible for sup boxes on the left. Attac	plying correct informati h the Additional Page to	ion. If more space is n	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No	s				
Arizon	thin the last 8 years, have you ha, California, Idaho, Louisiana, . Go to line 3. s. Did your spouse, former spou	Nevada, New Mexico, Pr	uerto Rico, Texas, Washi		
in line Form	e 2 again as a codebtor only i	f that person is a guara	ntor or cosigner. Make s	sure you have listed th	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	e
	Name			☐ Schedule E/F, I☐ Schedule G, Iin	
	Number Street City	State	ZIP Code	_	
3.2	Name			_ ☐ Schedule D, lin ☐ Schedule E/F, l☐ Schedule G, lin	line
-	Number Street City	State	ZIP Code	_	

Sill	in this information to	o identify your ca	000									
	otor 1	Antoine D H										
	otor 2 buse, if filing)						_					
Uni	ted States Bankrup	tcy Court for the:	EASTERN DISTRICT	OF MICHIGA	N							
	se number 19-	46430		-				□ An □ A s	if this is: amende suppleme income a	d filing ent showing	g postpetitior Illowing date	n chapter
O	fficial Form	<u> 1061</u>						MM	// DD/ Y	YYY	_	
So	chedule I: `	Your Inco	ome									12/15
sup _i spo atta	plying correct info use. If you are sep ch a separate shee t1: Describe	rmation. If you arated and you et to this form. (Employment	ible. If two married peo are married and not fili r spouse is not filing wi On the top of any additi	ng jointly, and ith you, do no	d your spo ot include i	use i nforr	s livi natio	ng with yon about y	ou, inclu our spo	ude inform ouse. If mo	nation about ore space is	your needed,
1.	Fill in your employment information.			Debtor 1				ı	Debtor 2	or non-fil	ing spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employe	ed				☐ Emplo	•			
	information about employers.		Occupation	☐ Not emp	employed				□ Not ei	mployed		
	Include part-time, self-employed wo		Employer's name	Family Do	ollar							
	Occupation may in or homemaker, if		Employer's address	15100 Wyoming Ave, Detroit, MI 48238								
			How long employed to	here? 2	018				_			
Par	t 2: Give Det	tails About Mon	thly Income									
	mate monthly incouse unless you are s		ate you file this form. If	you have noth	ing to repo	rt for	any li	ine, write \$	\$0 in the	space. Inc	lude your no	n-filing
•	u or your non-filing e space, attach a se	•	re than one employer, co	ombine the info	ormation fo	r all e	mplo	yers for th	nat perso	n on the lir	nes below. If	you need
								For Debt	or 1		otor 2 or ng spouse	
2.			ry, and commissions (be calculate what the monthle			2.	\$_	1,7	72.11	\$	N/A	-
3.	Estimate and list	monthly overti	me pay.			3.	+\$ _		0.00	+\$	N/A	-
4.	Calculate gross	Income. Add lin	e 2 + line 3.			4.	\$_	1,772	2.11	\$	N/A	

Deb	or 1 _	Antoine D Howell	_	Case number (if	known)	19-464	30	
				For Debtor 1	I		ebtor 2 or	
	Conv	line 4 here	4.	\$ 1.77	72.11	non-fil	ling spouse N/A	
			••	Ψ	2.11	Ψ	197	<u> </u>
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.		51.07	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	_
	5c.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c.	\$	0.00	\$	N/A	_
	5d. 5e.	Insurance	5d. 5e.	\$	0.00	\$	N/A N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	_
	5h.	Other deductions. Specify:	5h.+	\$		+ \$	N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ 35	51.07	\$	N/A	<u> </u>
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 1,42	21.04	\$	N/A	<u> </u>
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						_
	01	monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	<u> </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	ı					
		settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	_
	8e.	Social Security	8e.	\$	0.00	\$	N/A	<u>\</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	— 8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	<u> </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/.	A
10.		ulate monthly income. Add line 7 + line 9.	10. \$	1,421.04	1 + \$		N/A = \$ _	1,421.04
	Add t	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			┙┕			
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not ify:	depen			•	nedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certales					12. \$	1,421.04
							Combi	
13	Do v	ou expect an increase or decrease within the year after you file this form	?				month	ly income
	J.	No.						
	_	Yes. Explain:						
	_							

Fill	in this informa	tion to identify yo	our case:					
Deb	tor 1	Antoine D H	owell			Check	if this is:	
Dob	tor 2					_	an amended filing	uina naatnatitian ahantar
	tor 2 ouse, if filing)							ving postpetition chapter the following date:
Unit	ed States Bankı	uptcy Court for the	EASTE	RN DISTRICT OF MICHIG	iAN	<u> </u>	MM / DD / YYYY	
	e number 19	9-46430						
Of	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	ises				12/15
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this n.				
Par	t 1: Descr Is this a joir	ibe Your House	ehold					
	■ No. Go to	line 2.	in a separ	ate household?				
	□ N □ Y	-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debto	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								Yes
								□ No
3.	Do vour ext	enses include	_	NI.				☐ Yes
0.	expenses o	f people other t	han 🦳	No Yes				
	yourself and	d your depende	nts? □	165				
		ate Your Ongoi						
exp	imate your ex enses as of a blicable date.	openses as of your date after the	our bankr bankrupto	uptcy filing date unless y y is filed. If this is a supp	ou are using this fo lemental <i>Schedule</i>	orm as a sup <i>J</i> , check the	plement in a Cha box at the top o	apter 13 case to report of the form and fill in the
				government assistance in cluded it on <i>Schedule I:</i> Y				
(Off	ficial Form 10)6I.)					Your exp	enses
4.		or home owners and any rent for th		ses for your residence. In or lot.	nclude first mortgage	4. \$		430.00
	If not include	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
	•	rty, homeowner's				4b. \$		0.00
				upkeep expenses		4c. \$		0.00
5.		owner's associa nortgage pavm		dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00
٥.					oquity lourio	σ. ψ		0.00

Deb	otor 1	Antoine	D Howell	Case numb	per (if known)	19-46430
6.	Utiliti	ioc:				
0.	6a.		heat, natural gas	6a.	\$	100.00
	6b.		wer, garbage collection		\$	50.00
	6c.		e, cell phone, Internet, satellite, and cable services		\$	100.00
	6d.	Other. Spe	· · · · · · · · · · · · · · · · · · ·	6d.	\$	0.00
7.			ekeeping supplies		\$	315.00
8.			children's education costs	8.	\$	0.00
9.			ry, and dry cleaning	9.	\$	125.00
		•	products and services		\$	125.00
11.			ntal expenses	11.		50.00
			Include gas, maintenance, bus or train fare.			
			ar payments.	12.	\$	100.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	25.00
14.	Char	itable cont	ributions and religious donations	14.	\$	0.00
15.	Insur	rance.				
			surance deducted from your pay or included in lines 4 or 20.			
		Life insura		15a.		0.00
		Health ins		15b.	•	0.00
		Vehicle ins		15c.	·	0.00
			rrance. Specify:	15d.	\$	0.00
16.			clude taxes deducted from your pay or included in lines 4 or 20		_	
	Spec	,		16.	\$	0.00
17.			ease payments:	47-	Φ.	0.00
			ents for Vehicle 1	17a.		0.00
			ents for Vehicle 2	17b.	•	0.00
		Other. Spe	-	17c.	·	0.00
40		Other. Spe	•	17d.	\$	0.00
18.			of alimony, maintenance, and support that you did not rep your pay on line 5, Schedule I, Your Income (Official Form		\$	0.00
19			s you make to support others who do not live with you.	1001).	\$	0.00
	Spec		you make to support outlots time us not not man your	19.		0.00
20.		·	erty expenses not included in lines 4 or 5 of this form or o		ur Income.	
			s on other property	20a.		0.00
		Real estat		20b.	\$	0.00
	20c.	Property, h	homeowner's, or renter's insurance	20c.	\$	0.00
			nce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21.		r: Specify:		21.	· ·	0.00
		. ,				0.00
22.			monthly expenses			
			through 21.		\$	1,420.00
	22b.	Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official Form 10	06J-2	\$	
	22c. /	Add line 22a	a and 22b. The result is your monthly expenses.		\$	1,420.00
22	Cala		monthly not income	Į		
∠3.		-	monthly net income. 12 (your combined monthly income) from Schedule I.	23a.	c	1 424 04
			monthly expenses from line 22c above.		*	1,421.04
	∠30.	Copy your	monuny expenses nom line 220 above.	23b.	-φ	1,420.00
	23c	Subtract v	our monthly expenses from your monthly income.			
	236.		is your <i>monthly net income</i> .	23c.	\$	1.04
		o roodit	y:	ı		
24.			an increase or decrease in your expenses within the year a			
			ou expect to finish paying for your car loan within the year or do you exp	ect your mortgage p	ayment to incre	ease or decrease because of a
			terms of your mortgage?			
	■ No					
	□ Ye	es.	Explain here:			

Fill in this information to ide	entify your case:		
	D Howell		
First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name	
United States Bankruptcy Cou	urt for the: EASTERN DISTRICT O	PF MICHIGAN	
Case number 19-46430			
(if known)			☐ Check if this is an amended filing
Official Form 106Dec	C		
Declaration Ab	out an Individual	Debtor's Schedu	ıles 12/15
If two married people are filir	ng together, both are equally respon	nsible for supplying correct inforr	mation.
			a false statement, concealing property, or
obtaining money or property years, or both. 18 U.S.C. §§ 1		ruptcy case can result in fines up	p to \$250,000, or imprisonment for up to 20
, jours, or bount to order 33 .	02, 1011, 1010, and 00111		
a			
Sign Below			
Did you pay or agree to	pay someone who is NOT an attor	ney to help you fill out bankruptc	y forms?
■ No			
☐ Yes. Name of person	on		Attach Bankruptcy Petition Preparer's Notice,
			Declaration, and Signature (Official Form 119)
Hadan namaltu af namium	. I de alone that I have need the assume	many and askedulas filed with thi	in declaration and
that they are true and co	 I declare that I have read the sumper prect. 	mary and schedules filed with this	s declaration and
X /s/ Antoine D How	/ell	X	
Antoine D Howell Signature of Debtor 1		Signature of Debtor 2	
Date May 13, 201	Q		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in this info	ormation to identify you	r case:			
Debtor 1	Antoine D Howe		LastNama		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
Case number	19-46430				
(if known)				-	Check if this is an amended filing
					j
Official F	orm 107				
Statemen	nt of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19
information. If		ible. If two married people a attach a separate sheet to stion.			
Part 1: Give	e Details About Your Ma	arital Status and Where You	Lived Before		
1. What is yo	our current marital statu	ıs?			
☐ Marrie	ad				
_	ed narried				
2. During the	e last 3 vears, have you	lived anywhere other than v	where you live now?		
_	, , ,				
□ No	: - t - - f +	lived in the leat Overes. De un			
■ Yes. I	List all of the places you	lived in the last 3 years. Do no	ot include where you live nov	<i>1</i> .	
Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
20210 G Detroit,	ilchrist MI 48235	From-To: 2015 - 2018	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
states and territ	<i>tories</i> include Arizona, Ca	ver live with a spouse or leg llifornia, Idaho, Louisiana, Nev hedule H: Your Codebtors (Of	vada, New Mexico, Puerto R		
Part 2 Exp	lain the Sources of You	ır Income			
Fill in the to	otal amount of income yo	nployment or from operatin ou received from all jobs and a have income that you receive	all businesses, including part	time activities.	ndar years?
∐ No ■ Yes F	Fill in the details.				
_ 100.1	i iii iii doddiio.	211		D.11	
		Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	1 of current year until iled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$7,088.45	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Official Form 107

De	ebtor 1 Ar	ntoine D H	owell		Case number (if known) 19-46430						
				Debtor 1			Debtor 2				
				Sources of income Check all that apply.	(befo	ss income are deductions and asions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)		
	(January 1 to December 31, 2018)		■ Wages, commissions, bonuses, tips	,	\$5,847.00	☐ Wages, combonuses, tips	ımissions,				
				☐ Operating a business			☐ Operating a	business			
5.	Include incand other winnings. List each	come regard public bene If you are fil	dless of whet fit payments ing a joint ca the gross inc	the during this year or the the that income is taxable. It pensions; rental income; in se and you have income that ome from each source separate.	Examples of terest; diving the second	of other income are dends; money colle ived together, list it	alimony; child supp cted from lawsuits; only once under D	royalties; ebtor 1.			
				Debtor 1			Debtor 2				
				Sources of income Describe below.	each (befo	ss income from source are deductions and asions)	Sources of ind Describe below		Gross income (before deductions and exclusions)		
Pa	art 3: Lis	t Certain Pa	ayments You	ı Made Before You Filed fo	or Bankru	ptcy					
6.	Are eithe □ No.	Neither D individual	ebtor 1 nor primarily for	2's debts primarily consun Debtor 2 has primarily cor a personal, family, or house ore you filed for bankruptcy,	nsumer de hold purpo	bts. Consumer deb se."			101(8) as "incurred by an		
		□ Yes	List below paid that c not include	 cach creditor to whom you preditor. Do not include payments to an attorney found to a 1/01/22 and every 3 years. 	nents for dor this bank	omestic support obli ruptcy case.	gations, such as cl	nild suppor	t and alimony. Also, do		
	Yes.			or both have primarily con ore you filed for bankruptcy,			al of \$600 or more	?			
		■ No.	Go to line	7.							
		□ Yes	include pa	each creditor to whom you pyments for domestic suppor r this bankruptcy case.							
	Creditor	's Name an	d Address	Dates of payi	ment	Total amount paid	Amount you still owe	Was thi	s payment for		
7.	Insiders in of which y	nclude your or our or	relatives; any fficer, directo	r bankruptcy, did you mak general partners; relatives r, person in control, or owne proprietor. 11 U.S.C. § 101.	of any ger er of 20% o	eral partners; partn r more of their votin	erships of which yog g securities; and a	ou are a ge ny managi	neral partner; corporations ng agent, including one fo		
	■ No □ Yes.	List all sau	monto to an :-	ocidor							
		Name and	nents to an i	Dates of payı	ment	Total amount paid	Amount you still owe	Reason	for this payment		
						P					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

De	btor 1 Antoine D Howell		Case numb	er (if known)	19-46430	
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer any prop	perty on ac	count of a d	ebt that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment		unt you still owe	Reason for Include cred	this payment litor's name
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	□ No■ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	Credit Acceptance Corporation v Antoine Howell 18-166695-GC	Civil	36th District Court 421 Madison Ave Detroit, MI 48226		☐ Pending ☐ On appeal	
			,		Conclud	ed
					Judgment	for Plaintiff
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		nty repossesseu, rorectos	eu, garriis	neu, attachet	a, seizeu, oi levieu :
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	ened			
	Roosen, Varchetti & Olivier, PLLC PO Box 2305 Mount Clemens, MI 48046	Debtor's Wages Gari Filing	nished 90 Days Prior to	1/27/ ⁻ 4/20/ ⁻	19 thru 19	\$717.10
	mount of officers, and rooms	☐ Property was reposse☐ Property was foreclos				
		■ Property was garnishe				
		☐ Property was attached	d, seized or levied.			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		luding a bank or financial	institution	, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possession of a	n assignee	e for the bene	efit of creditors, a
	■ No □ Yes					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

DCL	Antonie D nowen		(II KIIOWII) 19-40430	
Par	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankrup ■ No	tcy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or con		_	
	Gifts or contributions to charities that totamore than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	or gambling?	cy or since you filed for bankruptcy, did you lose anyt	thing because of the	ft, fire, other disaster,
	how the loss occurred	escribe any insurance coverage for the loss	Date of your loss	Value of property lost
	In In	clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property.		
Par	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or pre	cy, did you or anyone else acting on your behalf pay or eparing a bankruptcy petition? parers, or credit counseling agencies for services required		erty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Cicchelli Law Offices, PLLC 15900 W. Ten Mile Rd., Suite #201 Southfield, MI 48075 cicchellilaw@comcast.net	Attorney Fees & Filing Fee	4/28/2019, 4/29/2019	\$1,035.00
	Access Counseling, Inc.	Credit Counseling	4/27/2019	\$8.95
17.		cy, did you or anyone else acting on your behalf pay or or to make payments to your creditors? ou listed on line 16.	or transfer any prope	rty to anyone who
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but include both outright transfers and transfers mainclude gifts and transfers that you have already No Yes. Fill in the details.	isiness or financial aff de as security (such as	airs? the granting of a s			•					
	Person Who Received Transfer Address Person's relationship to you	Description and property transfer		payme	pe any property or nts received or debts exchange	Date tra made	nsfer was				
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prof ■ No □ Yes. Fill in the details.	tection devices.)				of which y	ou are a				
	Name of trust	Description and	value of the prope	erty transf	erred	Date Transfer was made					
Par 20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No Yes. Fill in the details. Name of Financial Institution and	v, were any financial acrou	ccounts or instru	ments held of deposit;	d in your name, or for y	t unions, t	,				
	Address (Number, Street, City, State and ZIP Code)	account number	instrument		closed, sold, moved, or transferred	before	closing or transfer				
21.	Do you now have, or did you have within 1 yearsh, or other valuables? No	ear before you filed fo	r bankruptcy, any	/ safe dep	osit box or other depos	itory for s	ecurities,				
	Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number,		Describe t	he contents	Do yo	ou still it?				
22.	Have you stored property in a storage unit o	State and ZIP Code) Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?									
	■ No □ Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe t	he contents	Do yo	ou still it?				
Par	t 9: Identify Property You Hold or Control f	for Someone Else									
23.	Do you hold or control any property that son for someone. No Yes. Fill in the details.	neone else owns? Inc	lude any property	you borro	owed from, are storing	for, or hold	d in trust				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe t	he property		Value				
	t 10: Give Details About Environmental Info	rmation									

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Official Form 107

Best Case Bankruptcy

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Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Antoine D Howell Case number (if known) 19-46430

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? п Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☐ Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code)

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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vith a		ing a false statement, concealing property, or obtaining money or property by fraud in connection up to \$250,000, or imprisonment for up to 20 years, or both.					
/s/ Ar	ntoine D Howell						
Antoi	ne D Howell	Signature of Debtor 2	Signature of Debtor 2				
Signa	ture of Debtor 1						
Date	May 13, 2019	Date					
Did yo	u attach additional pages to Your	ntement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?					
No							
□ Yes							
Did yo	u pay or agree to pay someone wh	s not an attorney to help you fill out bankruptcy forms?					
-							

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case number (if known) 19-46430

Debtor 1 Antoine D Howell

United States Bankruptcy Court Eastern District of Michigan

In re	Antoin	e D Howell			Case No.	19-46430	
				Debtor(s)	Chapter	7	
				IT OF ATTORNEY FOR D JANT TO F.R.BANKR.P. 20			
	The unc	lersigned, pursuan	t to F.R.Bankr.P. 2016(b)	, states that:			
	The und	lersigned is the att	orney for the Debtor(s) in	this case.			
	The con	npensation paid or	agreed to be paid by the	Debtor(s) to the undersigned	is: [Check one]		
	[X]	FLAT FEE					
	A.	-	_	ation of and in connection wit		700.00	
	B.	Prior to filing t	his statement, received		· · · · · · · · · · · · · · · · · · ·	700.00	
	C.	The unpaid bal	ance due and payable is .			0.00	
	[]	<u>RETAINER</u>					
	A.	Amount of reta	niner received				
	В.			tainer at an hourly rate of \$ d expenses exceeding the am		irly rate schedule.] Debtor(s) have	
	\$_335.00 of the filing fee has been paid.						
	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]						
	A.	Analysis of the bankruptcy;	debtor's financial situation	n, and rendering advice to the	e debtor in determining v	whether to file a petition in	
	B. C.			nedules, statement of affairs a			
	D.—			ng of creditors and confirmation of creditors and other content of the content of			
	E.	Reaffirmations;			1 3		
	F. G.	Redemptions; Other:					
	G.	Negotiations reaffirmation		ications as needed; prep		ning; preparation and filing of motions pursuant to 11 USC	
	By agre	Representation		ed fee does not include the fony dischargeability action ceeding.		lances, relief from stay	
i.	The sou A. B.	xx XX		m: ages, compensation for servic ing the identity of payor)	es performed		
	corpora	The undersigned has not shared or agreed to share, with any other person, other than with members of the undersigned's law firm or corporation, any compensation paid or to be paid except as follows: Except for \$60 to outside counsel for purposes of 341 hearing coverage.					
Dated:	May 13, 2019				/s/ Erica L. Cicchelli		
					Attorney for the Debtor		
					Erica L. Cicchelli P5 Cicchelli Law Office		
					15900 W. Ten Mile R	d., Suite #201	
					Southfield, MI 48075 248-552-9210 cicche	5 ellilaw@comcast.net	
			-		5 00_ 02 10 0100110		
Agreed:		ntoine D Howell ine D Howell					

Debtor

Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	r 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

in re Antoine D Howell		Case No.	19-46430
	Debtor(s)	Chapter	7
VE	RIFICATION OF CREDITOR	MATRIX	
The above-named Debtor hereby verifi	es that the attached list of creditors is true and	correct to the best	of his/her knowledge.
Date: May 13, 2019	/s/ Antoine D Howell		
	Antoine D Howell		

Signature of Debtor